

§ 101-5.305 Agency participation.

At the time the space requirements for a building or a group of adjoining buildings are developed by GSA, the prospective occupying agencies will be canvassed by GSA to determine if they wish to participate in the occupational health services program. Each agency desiring to participate in the program will be requested to furnish GSA with a written commitment, signed by an authorized official, that it is prepared to reimburse GSA, or such other agency as is designated pursuant to § 101-5.105(b), on a yearly per capita basis for each of its employees housed in the building or buildings covered by the program.

§ 101-5.306 Economic feasibility.

(a) The studies by GSA which lead to the development of space requirements and the determinations made as the result thereof will constitute the feasibility studies and the Administrator's determination contemplated by § 101-5.104.

(b) Each determination to provide health services will be governed by the principles stated in § 101-5.303 and will be in consonance with the general standards and guidelines furnished Federal agencies by the Public Health Service of the Department of Health, Education, and Welfare.

§ 101-5.307 Public Health Service.

(a) The only authorized contact point for assistance of and consultation with the Public Health Service is the Federal Employee Health Programs, Division of Hospitals, Public Health Service, Washington, DC 20201. Other Federal agencies may be designated by the GSA Regional Administrator, pursuant to § 101-5.105(b) to operate occupational health services. Designated agencies should contact the Public Health Service directly on all matters dealing with the establishment and operation of these services.

(b) Public Health Service should be consulted by the designated agency on such matters as types, amounts, and approximate cost of necessary equipment; the scope of the services to be provided if it is affected by the amount of space and number of building occupants; types and amounts of supplies,

materials, medicines, etc., which should be stocked; and the approximate cost of personnel staffing in cases where this method of operation is chosen, etc. PHS should also be asked to develop and monitor standards under which each health unit would be operated.

**Subparts 101-5.4—101-5.48
[Reserved]**

Subpart 101-5.49—Forms, Reports, and Instructions

§ 101-5.4900 Scope of subpart.

This subpart contains forms, reports, and related instructions used in connection with the regulations on centralized services in Federal buildings prescribed in this part 101-5.

[30 FR 4359, Apr. 3, 1965]

**PART 101-6—MISCELLANEOUS
REGULATIONS**

Sec.

101-6.000 Scope of part.

Subpart 101-6.1 [Reserved]

Subpart 101-6.2—Nondiscrimination in Programs Receiving Federal Financial Assistance

101-6.201 Scope of subpart.

101-6.202 Purpose.

101-6.203 Application of subpart.

101-6.204 Discrimination prohibited.

101-6.204-1 General.

101-6.204-2 Specific discriminatory actions prohibited.

101-6.204-3 Special programs.

101-6.205 Assurances required.

101-6.205-1 General.

101-6.205-2 Continuing State programs.

101-6.205-3 Elementary and secondary schools.

101-6.205-4 Applicability of assurances.

101-6.206 Illustrative applications.

101-6.207—101-6.208 [Reserved]

101-6.209 Compliance information.

101-6.209-1 Cooperation and assistance.

101-6.209-2 Compliance reports.

101-6.209-3 Access to sources of information.

101-6.209-4 Information to beneficiaries and participants.

101-6.210 Conduct of investigations.

101-6.210-1 Periodic compliance reviews.

101-6.210-2 Complaints.

101-6.210-3 Investigations.

101-6.210-4 Resolution of matters.